

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

HONOLULU ETHICS COMMISSION RECEIVED

31.7.19 18 DEC 24 P12:15

2019 REGISTRATION

Lobbyist Registration (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)				
KAKU, BEVERLY J.				
LOBBYIST FIRM/EMPLOYER (if applicable)		TELEPHONE		
CASTLE & COOKE, INC.		(808) 548-4811		
MAILING ADDRESS (No. and Street or	MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975	
680 IWILEI ROAD, SUITE 510		EMAIL bkaku@castlecooke.com		
(City) HONOLULU	(State) HI	(Zip Code) 96817		
PART II.A ORGANIZATION				
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE		
CASTLE & COOKE, INC.		(808) 548-4811		
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (808) 548-2975		
680 IWILEI ROAD, SUITE 510		EMAIL bkaku@castlecooke.com		
(City) HONOLULU	(State) HI	(Zip Code) 96817		
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members) Not Applicable				
METHODS USED BY MEMBERS TO M	IAKE POLICY DECISIONS		■ Not Applicable	
PART II.B NO LONGER LO	BBYING			

PART II.B NO LONGER LOBBYING		·
☐ I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE	

NOTE: This is a public document.

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY					
☐Business & Economic Development	□Community Services			□Customer Services	
□Culture & Arts	⊠Housing				
□Parks & Recreation	□Public Health, S	Safety & We	elfare	□Tourism	
□Transportation	⊠ Zoning & Planning			□Specific Legislation: □Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART IV LOBBYIST CER	TIFICATION				
I hereby certify that the foregoing state correct. Dec 1 3 2018 DATE	Subscribe foregoing statements are true and This 12 By: KY DI NOTARY OF		his 13 y. W KYOK OTARYOF	day of December ATOC 2018. OKO PATOC, State of Hawaii ATOC 2018. OF ANY OFFICIAL AUTHORIZED TO ADMINISTER DATHS mmission expires:	
PART V AUTHORIZATIO	N TO LOBBY	7			
NAME HARRY A. SAUNDERS TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED PRESIDENT					
NAME OF ORGANIZATION (if applicable) CASTLE & COOKE, INC.		TEL	ELEPHONE (808) 548-4811		
MAILING ADDRESS (No. and Street or P.O Box) FA			FAX	AX (808) 548-2975	
680 IWILEI ROAD, SUITE 510		EMA	EMAIL hsaunders@castlecooke.com		
(City)	(State) HI (Zip		(Zip	ip Code) 96817	
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned. DEC 1 3 2018					
(Signature of Authorizing Officer or	Person Renresente	ed)		municipin municipinate)	
(Signature of Mathematical of the State of t					

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CASTLE & COOKE, INC.		(808) 548-4811	
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PART II.A ORGANIZATION			
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE	
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (808) 548-2975	
680 IWILEI ROAD, SUITE 510		EMAIL bkaku@castlecooke.com	
(City) HONOLULU	(State)	(Zip Code) 96817	
ESTIMATED NUMBER OF MEMBERS	(if lobbying on behalf of members)	[⋉ Not Applicable
METHODS USED BY MEMBERS TO N	TAKE POLICY DECISIONS	[⋉ Not Applicable
PART II.B NO LONGER LO	BBYING		
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PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY				
☐Business & Economic Development	□Community Services			□Customer Services
□Culture & Arts	⊠Housing			
□Parks & Recreation	□Public Healt	h, Safety &	Welfare	□Tourism
	⊠Zoning & Planning			□Specific Legislation: □Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept
□Other (indicate below):				
PART IV LOBBYIST CERT	IFICATIO	N		
I hereby certify that the foregoing statements are true and correct. This By: LOBBYIST SIGNATURE DEC 1 3 2018 My contracts are true and substantial statements are true an		By: KYO NOTARY O	1 10/11 18:15	
PART V AUTHORIZATION TO LOBBY				
			RIZING OFFICER OR PERSON PRESIDENT	
NAME OF ORGANIZATION (if applicable) CASTLE & COOKE HOMES HAWAII, INC.		TE	TELEPHONE (808) 548-4811	
MAILING ADDRESS (No. and Street or P.O Box) FA		X (808) 548-2975		
680 IWILEI ROAD, SUITE 510		EM	EMAIL hsaunders@castlecooke.com	
(City)	(State) HI		(Zi	p Code) 96817
I heretay authorize the above-named person to engage in lobbying activities on behalf of the undersigned. DEC 1 3 2018				
(Signature of Authorizing Officer or Person Represented) (Date)				

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William Signature



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		Drand@castleco	oke.com
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PART II.A ORGANIZATION			
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE	
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			- Troco Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS			✗ Not Applicable
			[4] Not Applicable
PART II.B NO LONGER LOI	BBYING		

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☐Business & Economic Development	□Community Services			□Customer Services
□Culture & Arts	⊠Housing			☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health	n, Safety & W	Velfare	□Tourism
□Transportation				□Specific Legislation: □Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept
□Other (indicate below):			5,300	
	Allow Park			2 (9)
PART IV LOBBYIST CER	TIFICATION	N		
Correct. This By: LOBBYIST SIGNATURE DEC 13 2018 My com		This 19 By: KYOK NOTARY OF	day of Desember KO P. 2018 OKO PATOC, State of Hawaii A. OR ANY OFFICIAL AUTHORIZED TO ADMINISTER CATHS mmission expires: 14, 2020	
PART V AUTHORIZATIO	N TO LOBB	Y		
NAME HARRY A. SAUNDERS TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED PRESIDENT				
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(Signature of Authorizing Officer or Person Represented) (Date)				KO PAZIONA (Date)

NOTE: This is a public document.

NOTARY CERTIFICATION

Kyoko Palec First Judicial Circuit
Doc. Description 2019 Rev Stratu

Netery Signature

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